

***NJDHSS Communicable Disease Service Weekly
Statewide Influenza Activity Summary***

Week Ending December 10, 2004

Influenza level of activity: “SPORADIC ACTIVITY”

Influenza testing performed in New Jersey by:

- The Public Health and Environmental Laboratories (PHEL)
- The WHO and NREVSS (National Respiratory and Enteric Virus Surveillance System) Laboratories from November 1, 2004 to present:
 - Number of influenza A culture confirmed case: One
 - Number of influenza B culture confirmed case: None

Last week, the WHO and NREVSS laboratory located in a Northern New Jersey (Hospital), reported a culture confirmed influenza A isolate from a specimen taken from an ambulatory patient on November 24, 2004. That resulted in last week's influenza level of activity in the state of New Jersey being raised to **“SPORADIC ACTIVITY”**.

The level remains the same this week, since the NJDHSS Communicable Disease Services did not receive notification of any additional culture confirmed isolates, or influenza outbreaks in any of the LTC or healthcare facilities in any part of the state.

Reports from long-term care facilities of ILI since the season began, remain in the 1.05% to 1.63% range. Rates of school absenteeism and emergency department reports remained stable at low levels. Hospital laboratory surveillance for respiratory syncytial virus (often clinically indistinguishable from influenza virus infection) is starting to show significant increase in the number of tests performed and the number of positives results. This is not unexpected as we move further into the season.

Overall the surveillance parameters are still within the same baseline when compared with the same period last season. Though some of the county percentage parameters showed figures well above the total average (see 07Dec04Pdf table), but should not be interpreted as an increased level of activity since the denominator is very small.

According to the CDC nationwide flu report for week 47 (week ending November 27, 2004), influenza activity in the United States was low. One state reported regional influenza activity, two reported regional activity, while 35 states, the District of Columbia, New York City and New Jersey reported sporadic influenza activity. Twelve states reported no activity.

These activity levels were based upon laboratory culture-confirmed cases, and the CDC has antigenically characterized 36 influenza viruses collected since October 1, 2004 by some laboratories in the U.S. Twenty-six of the 36 were influenza A (H3N2) viruses and ten were influenza B viruses. These isolates were characterized as A/Fujian/411/2002-like (H3N2), and B/Shanghai/361/2002-like, which were the influenza A and B components recommended for the 2004-05-influenza vaccine

Influenza virus infection itself is not a clinical or laboratory reportable disease according to N.J.A.C. 8:57. Accordingly, activity levels must be extrapolated from weekly monitoring activities of healthcare facilities and providers dispersed around the state.

NJDHSS continues to make progress in making vaccine available to high priority individuals in the state. NJDHSS and LTCF- representative organizations have finalized vaccine allocation and distribution plans for nursing home and assisted living facilities. The majority of the orders have been submitted to the CDC, with the shipment of vaccine expected no later than December 19, 2004 and continuing into January 2005.

Currently the NJDHSS has several hundred doses of Flu Mist available for distribution to eligible healthcare workers who provide direct care to patients. Those who may be interested in obtaining this vaccine for free should contact the Immunization Program at (609)-588-7520.

References and Resources:

- <http://www.nj.gov/health/flu/preventflu.shtml>
- <http://www.cdc.gov/flu/>
- <http://www.who.int/csr/disease/influenza/en/>